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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10525173 | <b>Applicant(s)/Patent Under Reexamination</b><br>YOUNG, NIGEL D. |
|   | <b>Examiner</b><br>JULIO J MALDONADO       | <b>Art Unit</b><br>2823   |

| ORIGINAL                  |  |          |         |         |         | INTERNATIONAL CLASSIFICATION |   |   |   |                       |             |  |  |  |  |  |  |  |
|---------------------------|--|----------|---------|---------|---------|------------------------------|---|---|---|-----------------------|-------------|--|--|--|--|--|--|--|
| CLASS                     |  | SUBCLASS |         |         |         | CLAIMED                      |   |   |   |                       | NON-CLAIMED |  |  |  |  |  |  |  |
| 438                       |  | 145      |         |         |         | H                            | 0 | 1 | L | 21 / 339 (2006.01.01) |             |  |  |  |  |  |  |  |
| <b>CROSS REFERENCE(S)</b> |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
| <b>CLASS</b>              | <b>SUBCLASS (ONE SUBCLASS PER BLOCK)</b> |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
| 438                       | 50                                       | 75       | 78      | 145     |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
| 257                       | E31.061                                  | E31.078  | E31.079 | E31.081 | E31.082 |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
| 257                       | E31.064                                  | E33.046  | E21.361 | E21.617 |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |
|                           |  |          |         |         |         |                              |   |   |   |                       |             |  |  |  |  |  |  |  |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 1        | -     | 17       |       |          |       |          |       |          |       |          |       |          |       |          |
| 2   | 2        | -     | 18       |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 3        | 6     | 19       |       |          |       |          |       |          |       |          |       |          |       |          |
| 3   | 4        | 15    | 20       |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 5        | 17    | 21       |       |          |       |          |       |          |       |          |       |          |       |          |
| 7   | 6        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 4   | 7        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 8        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 13  | 9        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 14  | 10       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 16  | 11       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 12       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 10  | 13       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 14       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 15       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| -   | 16       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

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| NONE  |  | <b>Total Claims Allowed:</b> |                   |
|   |  | 17                           |                   |
| (Assistant Examiner)                          |  | (Date)                       |                   |
| /JULIO J MALDONADO/<br>Examiner.Art Unit 2823 |  | 08/15/2009                   |                   |
| (Primary Examiner)                            |  | (Date)                       |                   |
|   |  | O.G. Print Claim(s)          | O.G. Print Figure |
|   |  | 1                            | 2, 13             |